Education, Children and Families Committee

10am, Tuesday, 19 May 2015

Edinburgh Children's Partnership Integrated Plan for Children and Young People 2015-18

Item number 7.2

Report number Executive/routine

Wards

Executive summary

The purpose of this report is to advise the Education, Children and Families Committee of the revised Integrated Plan for Children and Young People 2015-2018, produced by the Edinburgh Children's Partnership to guide and monitor the work of the Edinburgh Children's Partnership.

The Integrated Plan articulates the partnership's vision for children and young people in Edinburgh and clearly outlines the agreed strategic outcomes and partnership priorities. It describes the steps that we will take, together with our partners, to achieve this vision and deliver improvements in the lives of our children and their families: it also describes the performance indicators and measures that will be used to report on our joint progress.

Links

Coalition pledges P1 - P6

Council outcomes <u>CO1 – CO6</u>

Single Outcome Agreement SO3

Integrated Plan for Children & Young People 2015-18

Recommendations

1.1 It is recommended the Education, Children and Families Committee notes the Plan and its content.

Background

- 2.1 Children and Families remains committed to playing its part in the Edinburgh Children's Partnership and to working collaboratively in meeting the jointly agreed priorities which the Integrated Plan describes.
- 2.2 The Edinburgh Children's Partnership is chaired by the Director of Children and Families and comprises representation from City of Edinburgh Council, NHS Lothian, Police Scotland, Scottish Children's Reporter Administration and Edinburgh's third sector.
- 2.3 The Integrated Plan supports and complements the Children and Families Service Plan
- 2.4 Preparing, implementing and reporting on a plan for children's services is a central requirement of the Children and Young People (Scotland) Act 2014. Edinburgh is well placed to respond to this requirement.

Main report

- 3.1 This report advises the Education, Children and Families Committee of the Integrated Plan for Children and Young People 2015-18 (Appendix 1) which articulates:
 - a. The Edinburgh Children's Partnership's vision for the children and young people of Edinburgh
 - b. The structure of the Partnership and the way in which it will work to implement and report on its activities
 - c. The agreed strategic outcomes under which work will be coordinated and reported
- 3.2 The plan aligns fully with the Edinburgh Partnership's Community Plan (Single Outcome Agreement) and will also contribute directly to the Council's strategic outcomes and the Capital Coalition Pledges.

Measures of success

4.1 The Integrated Plan lays out in detail how progress will be measured. There is a full set of performance indicators showing current performance and targets for the next three years.

Financial impact

5.1 There is no financial impact arising directly from this report.

Risk, policy, compliance and governance impact

6.1 There is no risk, policy, compliance and governance impact arising directly from this report.

Equalities impact

7.1 There are no negative equalities impacts arising directly from this report. The Integrated Plan makes direct reference to equalities implications where relevant but overall is intended will support work which reduces the outcome gap caused by inequalities and poverty.

Sustainability impact

8.1 There is no sustainability impact arising directly from this report.

Consultation and engagement

9.1 Engagement has taken place through the Performance and Infrastructure Group of the Children's Partnership, with the wider Partnership membership and through the Strategic Oversight Groups which exist to deliver the work plans associated with each strategic outcome. All of these groups are multi-agency.

Background reading/external references

Edinburgh Partnership Community Plan 2015-18

Gillian Tee

Director of Children and Families

Contact: Lynne Porteous (Lead Officer, Edinburgh Children's Partnership)

E-mail: lynne.porteous@edinburgh.gov.uk tel 0131 529 2111

Links

Appendices

Coalition pledges P1 – Increase support for vulnerable children, including help for families so that fewer go into care P2 - Hold the maximum P1 class size at 25 and seek to reduce class sizes in line with Scottish Government recommendations P3 – Rebuild Portobello High School and continue progress on all other planned school developments, while providing adequate investment in the fabric of all schools P4 – Draw up a long-term strategic plan to tackle both overcrowding and under use in schools P5 – Seek to ensure the smooth introduction of the Curriculum for Excellence and that management structures within our schools support the new curriculum P6 – Establish city-wide co-operatives for affordable childcare for working parents Council outcomes CO1 – Our children have the best start in life, are able to make and sustain relationships and are ready to succeed CO2 – Our children and young people are successful learners, confident individuals and responsible citizens making a positive contribution to their communities CO3 - Our children and young people in need, or with a disability, have improved life chances CO4 – Our children and young people are physically and emotionally healthy CO5 – Our children and young people are safe from harm or fear of harm, and do not harm others within their communities CO6 – Our children's and young people's outcomes are not undermined by poverty and inequality SO3 – Edinburgh's children and young people enjoy their Single Outcome Agreement childhood and fulfil their potential

1 - Integrated Plan for Children and Young People 2015-18

Edinburgh Children's Partnership INTEGRATED PLAN FOR CHILDREN AND YOUNG PEOPLE

2015 - 2018





THE EDINBURGH CHILDREN'S PARTNERSHIP

The Edinburgh Children's Partnership directs the strategic planning, development and delivery of children and young people's services on behalf of the Edinburgh Partnership. It is supported in its work by a Chief Officer Group. Each group meets bi-monthly

From April 2015 an Integrated Children's Services Board will also be established. This will build on and support the work of the Partnership and Chief Officer Group and also hold senior management within children's health, education and social work in Edinburgh accountable for the delivery of efficient and effective services and improved outcomes for children, young people and families in line with the requirements within the Children and Young People (Scotland) Act 2014.

The Partnership's vision is that all children and young people in the city enjoy their childhood and fulfil their potential whatever their circumstances. To achieve this we place children, young people and families at the heart of all our services and provide support when it is needed throughout childhood and the transition to adulthood.

The Edinburgh Children's Partnership comprises representatives from City of Edinburgh Council (CEC), Voluntary Sector (through EVOC), NHS Lothian (NHS), Scottish Children's Reporter Administration (SCRA), Police Scotland and Edinburgh College.

As a Partnership, we recognise the need for excellent universal services that build resilience and provide important protective factors. We will do all we can to strengthen support for families and communities to meet their children and young people's needs. Schools, working jointly with other services, have a key role to play at the heart of their communities in providing a range

of services to meet local people's needs and we will strengthen this through the development of the Team around the Cluster in localities.

We recognise that when children, young people or families need help or support they should get it as quickly as possible, from services that are responsive, appropriate, proportionate and timely and always focused on the best possible outcomes for the children and young people concerned.

We promote the values of equality, rights, diversity, respect and integrity across all our working relationships and work to ensure that help and support is provided, wherever possible, by those who know the child, young person or family well and understand what they need and what works well for them.

As the impact of disadvantage and inequalities on outcomes for children and young people is increasingly recognised, tackling this is central to achieving our vision. We will work both to tackle the root causes, and mitigate the impacts, of poverty and disadvantage and to proactively address inequalities in our planning and service delivery.

THE INTEGRATED PLAN FOR CHILDREN AND YOUNG PEOPLE

This plan – for all children, young people and their families in Edinburgh – has been developed by the Edinburgh Children's Partnership. It is aligned to the Edinburgh Partnership's Community Plan (formerly known as the Single Outcome Agreement) which describes how the city delivers the Scottish Government's commitments and its agreed shared priorities. The Community Plan focuses on four priority outcomes:

- Edinburgh's economy delivers increased investment, jobs, and opportunities for all
- Edinburgh's citizens experience improved health and wellbeing with reduced inequalities in health
- Edinburgh's children and young people enjoy their childhood and fulfil their potential
- Edinburgh's communities are safer and have improved physical and social fabric

The content of the Integrated Plan delivers on these priorities and sets out how partners have committed to work together effectively to secure the delivery of efficient, high quality and best value services resulting in improved outcomes for Edinburgh's children and young people, their families and their communities.

KEY DRIVERS

The <u>Christie Commission report</u> outlined the importance of integrating public services to improve outcomes for the people of Scotland. The establishment of the Integrated Children's Services Board and a single NHS lead for Children's Health will further enhance joint service planning, commissioning and delivery.

The <u>Children and Young People (Scotland) Act 2014</u>, requires community planning partners to demonstrate the extent to which children and young people's wellbeing is maximised and their rights are promoted and protected through joint planning and service delivery across a number of areas.

These include:

- Increasing the amount and flexibility of free early learning and childcare for 3 and 4 year olds and eligible 2 year olds
- Improving permanence planning for looked after children, and supporting the parenting role of kinship carers
- Enshrining elements of the Getting it right for every child (GIRFEC) approach in law, ensuring a single planning approach for children who need additional support from services, a single point of contact for every child and a holistic understanding of wellbeing
- Increasing accountability for progressing actions in children's services plans
- Providing reports on actions taken to meet requirements under the UN Convention of the Rights of the Child.

OUR STRATEGIC OUTCOMES

This plan covers the period from April 2015 – March 2018. It gives detail on our strategic outcomes and priorities for improvement. It also outlines the high level actions we will take to achieve the outcomes and priorities and the key performance indicators we will use to measure progress. Each of the high level actions is aligned to the quality indicators used by the Care Inspectorate in 'How well are we improving the lives of children and young people?' (see page 36).

Performance for the year 2014/15, and the relevant target for that year is contained in the annual report of progress which will be available via the Children's Partnership web pages.

The plan is structured around the seven Strategic Outcomes identified by the Children's Partnership. These are:

- SO1 Our children have the best start in life, are able to make and sustain relationships and are ready to succeed
- SO2 Our children and young people are successful learners, confident individuals and responsible citizens making a positive contribution to their communities
- SO3 Our children and young people in need, or with a disability, have improved life chances
- SO4 Our children and young people are physically and emotionally healthy
- SO5 Our children and young people are safe from harm and fear of harm, and do not harm others
- SO6 Our children's and young people's outcomes are not undermined by poverty and inequality
- SO7 Making effective use of our resources

PRIORITIES FOR IMPROVEMENT

The summary report of the joint inspection of inter-agency provision of children's services in Edinburgh, published in April 2013, assessed our services as *good*. A number of key strengths and areas for improvement were noted. The report (Services for children and young people in the City of Edinburgh) also noted that inspectors were very confident that our services would be able to make the necessary improvements.

Taking into account these findings, and using ongoing performance information, the following priorities for improvement have been identified:

- to improve support in early years so that all children reach appropriate developmental and social milestones
- to reduce the gap in achievement experienced by vulnerable children and young people, particularly those living in deprived areas
- to improve and extend help and support for children and families at an early stage so that fewer children need to be looked after
- to improve outcomes for children in need, particularly those who need to be looked after and those with a disability
- to improve mental health and wellbeing outcomes for children and young people
- to strengthen our approach to tackling child sexual exploitation
- to increase the number of young people who enter and sustain positive destinations, particularly those from disadvantaged or marginalised groups

HOW WILL THE PARTNERSHIP DELIVER THE OUTCOMES IN THE PLAN?

A Strategic Oversight Group (SOG), led by a member of the Edinburgh Children's Partnership, coordinates the multi-agency planning of services to address these outcomes and priorities and report on progress and improvement. A diagrammatic representation of the Partnership and these groups can be found on page 34.

Each SOG will develop its own workplan to deliver the high level actions in the Integrated Plan. Whilst the responsibility for ensuring actions are taken often remains with individual agencies and is detailed in their service plans, the SOG Lead has a key role in ensuring all agencies remain focussed on delivering improved outcomes for children and young people and in coordinating regular reporting to the Children's Partnership. Progress reports refer specifically to the agreed improvement themes and describe how outcomes are being met as well as detailing self-evaluation and engagement activity.

Guidance and scheduling for reporting is produced by the Partnership's multi-agency Performance and Infrastructure Group which meets monthly.

HOW DO WE MEASURE SUCCESS?

The Children's Partnership has a set of well-defined measures, with three-year targets, which are used for measuring success and progress towards achieving outcomes and addressing improvement priorities.

We want to develop further measures to assess our performance in achieving meaningful outcomes for children and young people in the long term. The Children's Partnership is developing an agreed outcomes framework for use in child planning across all partner agencies: this will also assist in assessing progress against our shared outcomes. We will continue to use existing performance information whilst developing this framework and other indicators to help us better support our joint assessment of progress in achieving the desired outcomes and quality services for children and young people.

Key to measuring progress is getting regular feedback from children, young people and their families about how well we are doing in meeting their needs. Feedback is used to inform planning for future service delivery. We will also seek to improve the quality of our joint self-evaluation to aid in measuring the success of partnership activity.

Strategic Oversight Group reports to the bi-monthly Children's Partnership incorporate details of engagement and self evaluation activity.

Further information on the Integrated Plan for Children and Young People, measuring progress, leadership and key groups can be found on the Children's Partnership web pages.

Strategic Outcome 1
Jointly led by Aileen
McLean and Lynda Cowie

Our children have the best start in life, are able to make and sustain relationships and are ready to succeed



We know that there is a direct link between the experiences of early childhood and what happens in adult life. We also know that parents' and carers' interaction with children during early childhood is critical in developing relationships and laying the foundations for positive physical and mental health development. "Giving every child the best start in life is also crucial to reducing health inequalities across the life course" (Marmot Review 2010). In planning our services and allocating resources we will focus on addressing the social gradient in terms of families' access to good quality, early childhood experiences. To achieve this we will continue to deliver high quality, universal early years' services which build family capacity and confidence and also provide additional support for those children most in need.

In October 2012, the Scottish Government launched the Early Years' Collaborative with the aim of making Scotland the best place in the world to grow up and to put the Early Years' Framework into practical action. The Edinburgh Early Years Collaborative Team was established to build on existing partnership work towards meeting the stretch aims identified by the Scottish Government (reduction in the rate of stillbirths and infant mortality, children reach appropriate developmental milestones - by the time of the 27-30 month review, by the time the child starts primary school and by the end of Primary 4). This multi-agency team established the following six groups to drive forward this work: Early support for pregnancy and beyond; Attachment and child development beyond maternity services and the 27-30

month child health review; Continuity of care in transitions between services; Developing parenting skills through Family Engagement to support early learning; Addressing child poverty; and, Improving attainment at primary 4.

We want to deliver increasingly integrated early years learning and childcare options with an emphasis on effective learning and support programmes for parents and carers, increased outreach provision and good quality local resources and information. Implementing and monitoring early interventions through the Early Years Change Fund is central to our ability to deliver transformational change in this respect and we will build on the learning from this approach in our service planning and delivery.

What high level actions will we take?

Improvement theme	Action	Delivered by	Lead	Quality Indicator
	Improve the health and wellbeing of pregnant women	December 2015	Lynda Cowie (NHS)	2.1
Improve support in early years so that all children reach appropriate developmental milestones	Develop early years services in all localities and increase the range of services provided through partnership working and more flexible use of resources	August 2015	Aileen McLean (CEC)	6.2
	Identify approaches to improve readiness for school including literacy, numeracy and health and wellbeing	August 2015	Aileen McLean (CEC)	2.1
	Develop and deliver the Psychology of Parenting Project in Edinburgh (a cluster-based approach to begin with, building to a whole city approach)	March 2016	Donny Scott (CEC)	2.2
	Continue to support the sustainability of Family Nurse Partnership to become a core universal service	August 2015	Lynda Cowie (NHS)	2.1
Continue to reduce outcome gaps for those at risk	Work with partners to develop a 'Childcare Guarantee' based on the Edinburgh Guarantee model to encompass childcare to support employment and training and universal breakfast and after-school club provision	March 2016	Vivienne Robinson (CEC)	2.1, 2.2
	Explore options for school holiday activity and care provision for children with additional support needs	August 2015	Carol Chalmers (CEC)	2.1, 2.2
Improve planning to meet needs so children experience long lasting improvements	Use the results from the 27-30 month Health Visitor review to improve planning for individual children	March 2016	Graham McKenzie (NHS)	5.3

Improvement theme	Action	Delivered by	Lead	Quality Indicator
Ensure eligibility criteria do not	Increase access to early learning and childcare for all 3-4 year olds and eligible 2 year-olds to 600 hours per year	August 2015	Aileen McLean (CEC)	2.2
restrict access to services	Evidence use of wellbeing indicators to consistently and holistically assess and meet needs across all children's service delivery	August 2015 Alleen McLean (CEC) Alleen McLean (CEC) March 2016 Alleen McLean (CEC) Alleen McLean (CEC) Alleen McLean (CEC) Alleen McLean (CEC) March 2016 Pat Southall (CEC) Alleen McLean (CEC) March 2016 Pat Southall (CEC) Alleen McLean (CEC) March 2016 March 2016 March 2016 Maria Gray (CEC)	5.2, 5.3	
Improve parent and carer support	Ensure local delivery of an identified range of parent support interventions and use feedback data to inform future priorities and influence practice	March 2016	Pat Southall (CEC)	2.1, 2.2
	Further develop opportunities for participation in Family Learning in targeted schools and nurseries	March 2016	Maria Gray (CEC)	2.1, 2.2
Improve joint self evaluation	Use the PDSA approach (as used in the Early Years Collaborative) to evaluate possible changes to services	August 2015	Donna Murray (CEC)	6.4
Improve joint self-evaluation	Implement the quality assurance framework for 0-3 in all establishments	August 2015	Aileen McLean (CEC)	6.4, 8.3

How will we measure progress?

Performance Measure	Perfor	mance	Target		Target			Comment
remonitance ivieasure	2012/13	2013/14	2015/16	2016/17	2017/18	Comment		
Number of early learning and childcare hours per year provided for children receiving their entitlement in Local Authority provision	475	475	600	600	600	The target of providing and securing 600 hours universal entitlement of quality early learning and childcare for 3 and 4 year olds, and for eligible 2 year olds by August 2014 was achieved.		
Percentage of children who have reached all of the expected developmental milestones at the time of the child's 27-30 month child health review	N/A	79%	81%	83%	85%	During the year 1 April 2013 – 31 March 2014, of 5304 eligible children, 4628 were assessed. There was no concern over all domains for 3650 of these children. There is an upward trend in performance between quarter 1 (76%) and quarter 4 (81%).		

Performance Measure	Perfor	mance		Target	: Comment	
Periorillance Measure	2012/13	2013/14	2015/16	2016/17	2017/18	Comment
Percentage of pregnant women in each SIMD quintile booked for antenatal care by the 12th week of gestation	90%	90%	90%	90%	90%	Latest data is for Edinburgh Community Health Partnership for April 2013 – March 2014. Target was originally to reach 80% by March 2015. As we are currently exceeding the target, NHS Lothian has agreed to stretch the target to 88%. Booking in for antenatal care ensures access to health support.
Percentage of Care Commission inspection reports evaluating 'Quality of Care and Support' as good or above	94.3%	Not available	95%	96%	97%	A Growing Up in Scotland project report has shown that children who experienced high quality care were more likely to show better language skills by age five, irrespective of their skills at age three and their background characteristics.
Percentage of children entering P1 with a baseline numeracy score of 85 or more	91%	90%	92%	92%	92%	The data is based on analysis of standardised tests administered to
Percentage of children entering P1 with a baseline literacy score level of 85 or more	89%	89%	90%	90%	90%	P1 pupils at the start of term. As it is a standardised assessment the aim is to maintain performance.

Strategic Outcome 2
Jointly led by David
Bruce and Karen Prophet

Our children and young people are successful learners, confident individuals and responsible citizens making a positive contribution to their communities



We are committed to providing high quality learning environments which work with families to meet the needs of all children and young people. We recognise that many children face barriers to learning and that these may arise in school and/or as a result of family or social circumstances. We are committed to the delivery of effective provision to meet these additional support needs and by identifying early those at greatest risk of being educationally disadvantaged we can target collaborative support to ensure that all achieve their full potential. The implementation of Getting it right for every child through a well-informed assessment of need and a single integrated child's plan which addresses all aspects of the wellbeing of children, is therefore a key priority.

By enabling children and young people to develop the knowledge, skills and attributes they need to flourish in life, learning and work, they will become successful learners, confident individuals, responsible citizens and effective contributors. In addition to existing attainment measures, we are developing more ways to measure wider achievement in areas such as the Duke of Edinburgh and John Muir Award Scheme, outdoor learning, volunteering and creative learning. We also recognise and value the contribution that children and young people make to their own learning, development and achievement when they engage in youth work and other community learning and development activities and support the provision of such opportunities at locality level.

Developing good relationships and positive behaviour in the classroom, playground and wider community is essential for creating the right environment for effective learning and teaching. Where children and young people feel included, respected, safe and secure and when their achievements and contributions are valued and celebrated, they are more likely to develop self-confidence, resilience and positive views about themselves. The Partnership will promote joint working which supports this approach across all learning communities in Edinburgh.

What high level actions will we take?

Improvement theme	Action	Delivered by	Lead	Quality Indicator
	Increase opportunities to develop citizenship and wellbeing through accreditation of all schools as Rights Respecting Schools	March 2016	David Bruce (CEC)	2.1
	Ensure that those at risk of being educationally disadvantaged, particularly those living in deprived areas, are identified early and collaborative support is targeted	June 2016	Karen Prophet (CEC)	2.1
	Continue to increase the use of joint practice by neighbourhood/strategic groups senior leaders to identify strengths and areas for improvement in performance as part of the ongoing strategies for further improvement	March 2016	Karen Prophet (CEC)	2.1, 6.4
Reduce the gap in achievement experienced by vulnerable children, particularly those living	Continue to engage with partners to develop different pathways for individual young people	March 2016	Karen Prophet (CEC)	5.3
in deprived areas	Ensure children and young people with a disability are engaged with and enjoy attending school	March 2016	Karen Prophet (CEC)	2.2
	Maintain a range of opportunities for participation in non-formal learning activities	March 2016	Maria Gray (CEC)	2.1
	Establish a STEM (Science, Technology, Engineering and Mathematics) academy to take forward the recommendations of the Developing Scotland's Workforce report	March 2018	Jane Handley (Edinburgh College)	2.1
	Increase overall participation in universal youth work	March 2016	David Bruce (CEC)	2.1, 4.1

Improvement theme	Action	Delivered by	Lead	Quality Indicator
Improve planning to meet needs so children experience long lasting improvements	Ensure there is clarity regarding child's planning including format of plans and expectations of meetings, involvement of parents, young people and partners	March 2016	Karen Prophet (CEC)	6.1, 5.3, 6.3
	Ensure that all schools provide opportunities to have a say in the running of the school, and are asked for feedback on their learning experiences	March 2016	Karen Prophet (CEC)	5.3
	Develop measures to support performance monitoring on wider achievement	March 2016	David Bruce (CEC)	6.4
Improve and extend help and	Ensure there are consistent approaches across all schools to assessing and responding to risks and needs	March 2016	Karen Prophet (CEC)	5.2
support at an early stage	Improve engagement with parents	March 2016	Moyra Wilson (CEC)	6.3
Improve joint self-evaluation	Continue to increase the use of more robust self-evaluation to ensure up-to-date, high quality information which is used to guide change in order to improve outcomes for young people	September 2015	Karen Prophet (CEC)	8.3, 2.1
	Develop effective self-evaluation involving key strategic leads to inform future plans	September 2015	Karen Prophet (CEC)	8.3

How will we measure progress?

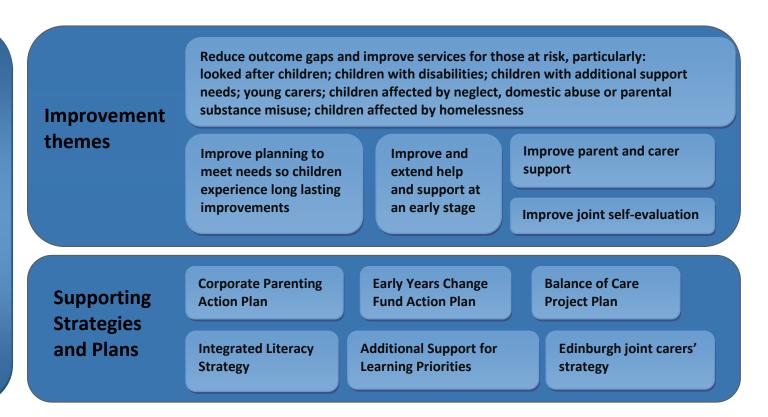
Performance Measure	Performance		Target			Comment
Performance ivieasure	2012/13	2013/14	2015/16	2016/17	2017/18	Comment
Percentage of pupils gaining 5+ SCQF awards at Level 6	29.7%	30.4%	30.8%	-	-	Data is pre-appeal and the indicator is defined by the Improvement Service Benchmarking programme. No targets set beyond 2015/16 due to the change in the exam system. National average was 28.1%.
Percentage of pupils gaining 5+ SCQF awards at Level 6 in the 20% most deprived areas (Scottish Index of Multiple Deprivation)	8.1%	8.7%	12.6%	-	-	Data is pre-appeal and the indicator is defined by the Improvement Service Benchmarking programme. No targets set beyond 2015/16 due to the change in the exam system. The national average was 12.6%. The aim is to close the gap in achievement experienced by those living in the most deprived areas in the city.

Performance Measure	Perfor	Performance		Target		Community
Performance Measure	2012/13	2013/14	2015/16	2016/17	2017/18	Comment
Average tariff score for looked after children	88	87	In line with or above the national average		ne national	Latest data is taken from the Scottish Government publication 'The Educational Outcomes for Looked After Children' published in June 2014. National performance was 116. The aim is to close the gap in achievement experienced by those who are looked after.
Percentage of half days attended by pupils in mainstream primary schools	94.9%	95.5%	95.6%	95.7%	95.8%	Key attendance strategies regularly discussed with schools and Education Welfare Service. Monitoring of standards at central and
Percentage of half days attended by pupils in mainstream secondary schools	92.5%	93.0%	93.1%	93.2%	93.3%	school level undertaken on a regular basis. Latest data is taken directly from SEEMIS. No national data is available for 2013/14.
Percentage of half days attended by pupils in special schools	91.7%	90.4%	90.6%	90.6%	90.6%	
Number of young people participating in the Duke of Edinburgh Awards programme	2,986	3,633	3,633	3,633	3,633	Record numbers of young people are participating in the scheme. The aim is to maintain the current participation levels.
Number of young people achieving Duke of Edinburgh Awards (Gold, Silver and Bronze)	432	616	627	658	691	Implementation of e-DofE (the electronic recording system) has improved reporting mechanisms significantly. 616 is the highest level of achievement to date and is split into 458 Bronze, 106 Silver and 52 Gold.
Percentage of young people achieving Duke of Edinburgh awards who live in deprived areas	17%	18%	20%	21%	22%	The data relates to those who have achieved an award and who live in a deprived area based on the 30% most deprived areas in Scotland using the Scottish Index of Multiple Deprivation.
Number of schools with Rights Respecting School Award (at all levels)	4	17	25	40	60	The data includes the 3 stages of the award – Record of Commitment; level 1 and level 2. Further increases in figures will be dependent on securing funding for delivery of the awards.
Number of children and young people achieving a John Muir award through school and the Outdoor Learning Centres	686	1,036	1,150	1,270	1,400	

Performance Measure	Perfor	Performance		Target		Comment
remonitance ivieasure	2012/13	2013/14	2015/16	2016/17	2017/18	Comment
Percentage of parents of children with additional support needs indicating that their child's learning is progressing well	Not available	78%	80%	82%	84%	
Number of young people (11-18) taking part in structured informal learning opportunities	7,500	7,500	7,500	7,500	7,500	Opportunities include open youth club provision, award scheme groups, specific activity groups. The aim is to maintain the participation levels.
Percentage of primary pupils who say they feel safe at school	88%	Not available	95%	96%	97%	Data taken from the pupil wellbeing survey. The survey is now
Percentage of secondary pupils who say they feel safe and cared for at school	75%	Not available	81%	88%	95%	biennial with the next survey to be carried out in 2014/15.

Strategic Outcome 3 Led by Alistair Gaw

Our children and young people in need, or with a disability, have improved life chances



We know that the needs of vulnerable children are best met in stable family situations and that looked after children (LAC) often experience poorer outcomes than their peers. We therefore want to support families earlier and more effectively when concerns are first identified and will encourage activities, allocate resources and support communities that provide a caring environment for children and young people in need.

We want to improve outcomes for all our children in need by focusing our attention on providing help and support at an early stage and working in partnership to address assessed needs as quickly possible. We also want to develop more integrated support services and strengthen the coordination role of the key worker or lead professional to minimise the number of interventions that families experience whilst maximising the impact of the allocated resource. Schools and associated support services will work together to improve attainment and wellbeing for all children and particularly for children in need.

By improving support for children and families at home, and in communities, we want to reduce the *need* for children to be accommodated and to be in a stronger position to invest more in early and effective identification and prevention work.

What high level actions will we take?

Improvement theme	Action	Delivered by	Lead	Quality Indicator
	Deliver all actions in the city's Looked After Strategy and Corporate Parenting Action Plan	March 2016	Scott Dunbar (CEC)	2.1
	Ensure looked after children have an up-to-date health assessment	August 2015	Anne Neilson (NHS)	2.1
Reduce outcome gaps and improve services for looked after children	Develop deliverable and safe alternative(s) to secure accommodation for young women at risk	March 2016	Scott Dunbar (CEC)	2.1
	Expand the range of foster care and placements available	March 2016	Scott Dunbar (CEC)	2.1, 2.2, 5.3
	Raise the attainment levels of looked after children and young people through a range of targeted actions within school settings and as part of the <i>Curriculum for Excellence</i>	June 2016	Karen Prophet (CEC)	2.1
	Increase access to social and leisure activities for children with a disability within universal services	March 2016	Carol Chalmers (CEC)	2.1, 2.2
	Develop the <i>Transition of Young People from Children's to Adult Services</i> policy to take into account the implications of Self-Directed Support	July 2015	Carol Rice (CEC)	2.1
Reduce outcome gaps and improve services for children and	Develop the <i>Children and Young People's Autism Strategy for Edinburgh</i> – to extend the <i>Children and Families Autism Plan</i> to include key priorities for all children with Autism	March 2016	Martin Vallely (CEC)	2.1, 6.2
young people with disabilities	Provide more consistent training across sectors and agencies in terms of dealing appropriately with children with challenging behaviour and/or complex needs	March 2016	Gillian Hunt (CEC)	7.2
	Develop the pupil/carer survey to include specific questions on levels of support provided and satisfaction with this	March 2016	David Maguire (CEC)	2.2, 6.3
	Develop performance measures to allow monitoring of whether children with a disability are able to access the appropriate supports to enable them to experience improved outcomes	March 2016	Carol Rice (CEC)	2.1, 6.4

Improvement theme	Action	Delivered by	Lead	Quality Indicator
Reduce outcome gaps and improve services for children with additional support needs	Develop locality-based ASL service delivery option	March 2016	Martin Vallely (CEC)	2.1, 6.2
Reduce outcome gaps and	Ensure that young carers' needs are adequately reflected in city's Carers Strategy	June 2015	Donny Scott (CEC)	2.1, 6.2
improve services for young carers	Ensure young carers are identified, recorded and supported within the education sector	June 2015	Donny Scott (CEC)	2.1, 5.2
Reduce outcome gaps and	Analyse the pathway and outcomes from the positive identification of domestic abuse during routine enquiry	March 2016	Ros Boyd (NHS)	2.1, 2.2, 6.2
improve services for children affected by neglect or domestic abuse or parental substance	Develop tools to support Named Persons when they are working with children affected by domestic abuse	March 2016	Anna Mitchell (CEC)	3.1, 7.2
misuse	Provide earlier support to families experiencing difficulties (with a specific focus on substance misuse and domestic violence) to reduce the need for children to become looked after	March 2016	Donny Scott (CEC)	2.1, 2.2, 5.2
Reduce outcome gaps and improve services for children	Build on existing <i>Recovery Hub</i> work to better identify children in need and provide support appropriately; Extend existing model to all <i>Recovery Hubs</i>	March 2016	Nick Smith (CEC)	2.1, 5.2
affected by homelessness	Gather data on adults and children who are registered homeless or are in temporary accommodation due to domestic abuse	August 2015	Anna Mitchell (CEC)	6.4
	Improve knowledge and understanding of Getting it right core components	March 2016	Martin Vallely (CEC)	6.2, 5.3
Improve and extend help and support at an early stage	Evidence use of wellbeing indicators to consistently and holistically assess and meet needs across all children's service delivery	March 2016	Martin Vallely (CEC)	2.1, 5.3
	Work to increase availability and uptake of long acting reversible contraception in community, specialist and hospital settings	March 2016	Dona Milne (NHS)	2.1

Improvement theme	Action	Delivered by	Lead	Quality Indicator
	Review availability of support provision to take account of <i>Self-Directed Support</i>	June 2015	Carol Chalmers (CEC)	2.1, 2.2
Improve parent and carer support	Provide specific parenting support and/or programmes for families of children with a disability	March 2016	Carol Chalmers (CEC)	2.1, 2.2
	Carry out Section 23 assessments as quickly as possible and ensure identified needs are met	March 2016	Carol Chalmers (CEC)	2.1, 2.2
	Develop and deliver the <i>Psychology of Parenting Project</i> in Edinburgh (a cluster-based approach to begin with, building to a whole city approach)	March 2016	Donny Scott (CEC)	2.2
	Ensure all children with a disability have a child's plan	March 2016	Carol Chalmers (CEC)	5.3
	Improve engagement with parents and carers to ensure they are involved in service planning and design for children and young people with a disability	March 2016	Carol Chalmers (CEC)	6.3
Improve planning to meet needs	Map disability services (including securing necessary funding)	December 2015	Joan Fraser (Voluntary Sector)	6.2
so children experience long lasting improvements	Introduce consistent outcomes framework to support planning and commissioning of services for all children and young people from vulnerable groups	March 2016	Donny Scott (CEC)	2.1, 6.4
	Work to ensure all Child's Plans record review dates for actions and monitor progress appropriately	March 2016	Martin Vallely (CEC)	2.1, 5.3
	Redesign <i>Children Affected by Parental Substance Misuse</i> (CAPSM) services across the city to ensure equity of provision	March 2016	Nick Smith (CEC)	5.3
Improve joint self-evaluation	Evaluate appropriateness and timeliness of services to meet individuals and families needs through case file audits and self evaluation activity	March 2016	Jon Ferrer (CEC)	6.4, 8.3

How will we measure progress?

2-6	Perfor	mance	Target			
Performance Measure	2012/13	2013/14	2015/16	2016/17	2017/18	Comment
Number of children who <u>need</u> to be looked after (rate per 1,000 0-17)	16.8	16.9	16.7	16.7	16.7	Through early support for children and families (while still responding to need), we aim to reduce the rate of growth in the number of children who need to be looked after. The calculation changed in 2013/14 from 0-18 to 0-17 to better reflect the population.
Percentage of the looked after children population that is in kinship care	21%	25%	22%	23%	24%	The introduction of the Kinship care support team has improved capacity to support kinship carers. Performance is monitored on a monthly basis and the figure shown is as at the end of July 2014.
Percentage of looked after children provided with a physical health assessment	Not available	98%	100% for all LAC	100% for all LAC	100% for all LAC	Assessments are currently undertaken with looked after and accommodated children and latest data shows 98% for the year 2013 with 100% achieved from February through to December. From December 2013 NHS Lothian will provide assessments for all looked after children, including those looked after at home.
Percentage of looked after children in a positive destination six months after leaving school	60%	65%	70%	75%	80%	Latest data is taken from the Scottish Government publication 'The Educational Outcomes for Looked After Children' published in June 2014. National performance was 62%.
Average tariff score for looked after children	88	87	90	100	110	Latest data is taken from the Scottish Government publication 'The Educational Outcomes for Looked After Children' published in June 2014. National performance was 116.
Percentage of Section 23s assessed within target timescales	35%	40%	42%	44%	46%	Under Section 23-24 of the Children (Scotland) Act 1995 the Council has a duty, when asked, to assess the needs of a child or young person affected by disabilities and the carer's ability to provide care for them. Continuous improvement targets have been set. Targets may have to be revised to take self-directed support into account.
Rate (per 1,000) of uptake by women aged 15-49 of very long acting reversible methods of contraception (LARC)	49.6	57.5	60	60	60	Data taken from NHS ISD Division publication 'Long acting reversible methods of contraception – Key Clinical Indicator' published in September 2014. The national figure was 62.1.
Percentage of children with a disability in mainstream schools saying they enjoy learning in school	Not available	64%	75%	-	77%	Data is taken from the self-evaluation survey undertaken in schools. The survey is biennial and will be run next in 2015.

Strategic Outcome 4 Led by Dona Milne

Our children and young people are physically and emotionally healthy



We want all children and young people in Edinburgh to have the opportunities, encouragement, support and guidance which maximise their chances to grow up being healthy, confident and resilient and developing positive relationships. We know that children learn better, achieve more and have better life chances when they are healthy and happy.

Research has found that there are a number of key things that help support children's social and emotional development. These include positive relationships and role models, good social and emotional skills and participating in meaningful activities at home, school and in their communities. Good mental health allows children and young people to develop the resilience to cope with whatever life throws at them and grow into well-rounded, healthy adults. Children learn positive ways to look after their minds and bodies not just through teaching but through imitation and interaction with others. It is therefore also important to promote positive physical and emotional wellbeing in the adults that work with and care for our children so they can be the positive role models that our children need.

Wherever possible, we will continue to support partnership working which shifts the emphasis from crisis management to prevention and early intervention, reduces health inequality between children and young people across Edinburgh and delivers responsive and appropriate physical and mental health services that have been designed to meet their needs.

We want our services and resources to enable and equip children and young people to make healthy lifestyle choices and reduce their exposure to, and negative impacts of, risky behaviours such as obesity, unsafe sex, unintended pregnancy, smoking and substance misuse.

What high level actions will we take?

Improvement theme	Action	Delivered by	Lead	Quality Indicator
	Offer S5/S6 pupils opportunities to become peer mentors in mental and emotional health programme e.g. <i>Cool, Calm and Connected</i>	December 2015	Patricia Santelices (CEC)	2.1
Improve mental health and wellbeing outcomes for children and young people	Engage secondary school staff with Mental Health First Aid for Children and Young People	March 2017	Patricia Santelices (CEC)	2.1
	Engage voluntary sector youth work staff and school nurses with Mental Health and First Aid	September 2015	Luisa Walker (NHS)	2.1
	Increase staff awareness of how best to support children and young people's mental health and deal with wellbeing concerns through roll out of the Supporting Children and Young People guides and associated training (Teenage Brains & Behaviour, Confident Staff, Confident Children etc.)	March 2016	Patricia Santelices (CEC)	3.1, 7.2
	Increase parental awareness of how best to support their children's mental health and wellbeing and improve relationships through universal programmes in primary and secondary schools (e.g. Raising Children and Raising Teens with Confidence)	March 2016	Patricia Santelices (CEC)	2.2
	Explore rollout of Safe Talk to residential childcare staff and children	August 2015	Rachel King (NHS)	2.1, 2.2
	Establish a programme to create a <i>Healthy Respect</i> drop-in in or near to all Edinburgh schools	September 2015	Kirsten Kernaghan (NHS)	2.1, 2.2

Improvement theme	Action	Delivered by	Lead	Quality Indicator
	Make <i>Healthy Families Healthy Children</i> (HFHC) available to all staff through the CEC CPD programme	March 2016	Cath Morrison (NHS)	7.2
	Continue to support <i>Health 4U</i> (H4U) availability to all local authority schools in Edinburgh (in 8 schools as at November 2014)	March 2016	Cath Morrison (NHS)	2.1
Improve and extend help and	Explore securing funding to mainstream <i>Get Going</i> and <i>H4U</i> programmes	August 2015	Cath Morrison (NHS)	2.1
support at an early stage in relation to child healthy weight	Continue to publicise the package of measures (<i>HFHC</i> , <i>H4U</i> , <i>Get Going</i> , clinical service) in place within schools and communities	milies Healthy Children (HFHC) available to all staff PD programme Int Health 4U (H4U) availability to all local authority gh (in 8 schools as at November 2014) Indige to mainstream Get Going and H4U August 2015 Cath Morrison (NHS) August 2015 Cath Morrison (NHS) Cath Morrison (NHS) August 2015 Cath Morrison (NHS) Cath Morrison (NHS) August 2015 Cath Morrison (NHS) September 2015 Graham Mackenzie (NHS) September 2015 Cath Morrison (NHS) March 2016 Robert Keightley (CEC) Service and service evaluation August 2016 Colin Lumsdaine (NHS) June 2016 Colin Lumsdaine (NHS)	2.1	
	Extend the PE pilot in north Edinburgh (Flora Stevenson, Stockbridge, St Mary's Leith) to other schools	September 2015		2.1
	Adapt programmes in line with emerging evidence from the national Child Healthy Weight group and aim for a city wide agreement on school-based prevention programmes	rging evidence from the national for a city wide agreement on September 2015 Cath Morrison (NHS) Paging evidence from the national September 2015 Cath Morrison (NHS) Paging evidence from the national September 2015 Cath Morrison (NHS) Paging evidence from the national September 2015 Cath Morrison (NHS)	6.2	
	Engage selected secondary schools in <i>Decipher-Assist</i> programme and provide appropriate staff to support delivery of the programme	June 2017	Colin Lumsdaine (NHS)	2.1, 2.2, 7.2
Improve and extend help and	Develop and agree shared care pathways for tier 3 and tier 4 services; Identify and address gaps in service provision to support young people with problematic substance misuse and commission as required	March 2016	Robert Keightley (CEC)	2.1, 6.2
support at an early stage in relation to children exhibiting risk-taking behaviour	Engagement of young people in development of the <i>Young People's</i> Substance Misuse service and service evaluation	March 2016	Robert Keightley (CEC)	2.1, 6.3
	August 2016 Cath Morrison (NHS) Continue to support Health 4U (H4U) availability to all local authority chools in Edinburgh (in 8 schools as at November 2014) August 2015 Cath Morrison (NHS) Cath Morrison	2.1, 2.2		
	CEC youth work services and youth services funded by CEC will review smoking/tobacco policies	March 2016 Cath Morrison (NHS) August 2015 Cath Morrison (NHS) August 2015 Cath Morrison (NHS) September 2015 Graham Mackenzie (NHS) September 2015 Cath Morrison (NHS) June 2017 Colin Lumsdaine (NHS) March 2016 Robert Keightley (CEC) June 2016 Colin Lumsdaine (NHS)	Colin Lumsdaine (NHS)	6.1

Improvement theme	Action	Delivered by	Lead	Quality Indicator
Improve and extend help and support at an early stage in	Meet Scottish Government target of testing minimum 10% tobacco retailers per annum	March 2016	Chris Morris (CEC)	2.1
	Ensure consistent delivery of <i>SHARE</i> programme in all secondary schools in Edinburgh	September 2015	Gael Cochrane (NHS)	2.1, 7.2
relation to children exhibiting risk-taking behaviour (cont.)	Introduce Zero Tolerance Respect programme to Edinburgh primary schools	March 2016	Helen Smart (NHS)	2.1
	Develop 'test of change' with young women at risk of non-attendance at school to better engage them in learning and reduce risk of unintended pregnancy	March 2016	Dona Milne (NHS)	2.1
Improve planning to meet needs	Consider the role of the NHS, Local Authority, third sector and children and young people in all new areas of work to ensure effective engagement with all partners	March 2016	Dona Milne (NHS)	6.3
so children experience long lasting improvements	Implement the recommendations from <i>Sophie's Pathway</i> to ensure that we are providing health and social care services that are responsive to the needs of children, young people and their families	March 2016	Gael Cochrane (NHS) Helen Smart (NHS) Dona Milne (NHS) Dona Milne (NHS) Dona Milne (NHS)	6.2
Improve joint self-evaluation	Liaise with link member of self-evaluation group to ensure consistent approach to joint self-evaluation	March 2016	Dona Milne (NHS)	6.4

How will we measure progress?

Performance Measure	Perfor	mance	Target			Comment
remonitalite ivieasure	2012/13	2013/14	2015/16	2016/17	2017/18	Comment
Percentage of young people waiting over 26 weeks from referral to treatment for specialist CAMHS services	8%	15%	0%	0%	0%	Previous target was to reach zero by March 2013. A further target of 0% for those waiting for over 18 weeks from referral to treatment to be reached by December 2014. The latest data shown is for the period April 2013 to March 2014.
Percentage of primary children who say they can ask for help when they need it	87.5%	Not available	89%	-	91%	A total of 12,157 pupils in 63 primary schools participated in the pupil wellbeing survey in 2012/13. The survey is now biennial with the next survey to be carried out in 2014/15.

Performance Measure	Perfor	Performance		Target		Target		Comment
Periormance ivieasure	2012/13	2013/14	2015/16	2016/17	2017/18	Comment		
Percentage of 15 year olds who are regular smokers	(2010) 13%	(2014) 6%	-	-	4%	Latest data taken from Scottish Schools Adolescent Lifestyle and Substance Use Survey (SALSUS) 2014. Data is only available at the local level every 4 years. Performance improved from 2010 when it was 13% and exceeded the target of 10%. National performance improved from 13% to 10%.		
Percentage of 15 year olds drinking once a week or more	(2010) 18%	(2014) 14%	-	-	10%	Latest data taken from Scottish Schools Adolescent Lifestyle and Substance Use Survey (SALSUS) 2014. Data is only available at the local level every 4 years. Performance improved from 2010 when it was 18% and exceeded the target of 15%. National performance improved from 20% to 17%.		
Percentage of 15 year olds who have used or taken drugs in the previous month	(2010) 11%	(2014) 9%	-	-	7%	Latest data taken from Scottish Schools Adolescent Lifestyle and Substance Use Survey (SALSUS) 2014. Data is only available at the local level every 4 years. Performance improved from 2010 when it was 11% and exceeded the target of 10%. National performance improved from 11% to 9%.		
Percentage of P1 pupils who are at risk of obesity	9.4%	8.3%	8.3%	8.1%	8.0%	Data is for the City of Edinburgh Council area and refers to school year 2012/13. The Edinburgh figure remains below the national average of 9.3%.		

Strategic Outcome 5 Led by Gareth Blair

Our children and young people are safe from harm and fear of harm and do not harm others



It is impossible to achieve all other aspirations for our children and families if they are not safe.

We are applying the learning from significant case reviews and from research to help us to recognise risk factors more quickly and to engage more effectively, both directly with children and young people and with their families. We are reshaping some of our services to respond at an early stage to those with recognised vulnerabilities and will continue to improve our child protection services with a focus on earlier support, engagement with children and families and self-evaluation.

Tackling child sexual exploitation in Edinburgh is a key priority. Coinciding with the publication of the Independent Inquiry into Child Sexual Exploitation in Rotherham (1997 – 2013) and the publication of Scotland's National Action Plan to tackle Child Sexual Exploitation, we are strengthening our approach to dealing with this issue. This will include the development of multi-agency policy, strategy and guidance for operational staff, increased public awareness and staff training.

When a young person's behaviour deteriorates or escalates, we are concerned both for the community and individuals affected, including the offending young person. We have taken steps to review our procedures for managing children and young people who pose a significant risk of harm to others and these are continuing to be disseminated through training and awareness-raising.

We are improving our capacity to provide support to families to build their capacity in a way that can sustain longer term change and improvement in outcomes for children and young people.

Through our approach to implementing Getting it right for every child, our Inter-Agency Child Protection Procedures and our data sharing agreements, we are continuing to improve information-sharing among agencies to enable effective responses to causes for concern.

What high level actions will we take?

Improvement theme	Action	Delivered by	Lead	Quality Indicator
Strengthen approach to tackling child sexual exploitation	Develop an inter-agency child sexual exploitation strategy and procedure for the City of Edinburgh	December 2015	Gareth Blair (Police Scotland)	6.1
Strengthen approach to tackling	Integrate child sexual exploitation into our inter-agency learning and development strategy	March 2016	Gareth Blair (Police Scotland)	7.2
	Ensure child sexual exploitation features in our public awareness activity	March 2016	Gareth Blair (Police Scotland) Gareth Blair	4.1
	Develop performance measures to ensure we can demonstrate that we can identify and tackle suspected child sexual exploitation in Edinburgh	December 2015 Gareth Blair (Police Scotland) Parning and March 2016 Gareth Blair (Police Scotland) Alwyn Bell (Police Scotland)	1.1	
	Improve identification, recording and awareness of domestic abuse. Incorporate data into performance reporting to the <i>Quality</i> Assurance Sub-Committee of the Child Protection Committee	December 2015	•	2.1
Improve and extend help and support at an early stage and take	Along with the Edinburgh Violence Against Women Partnership, undertake multi-agency staff awareness sessions around the identification, impact and prevalence of domestic abuse	March 2016	· · · · · · · · · · · · · · · · · · ·	2.1
protective measures where required	Ensure that the roll out of the domestic abuse court and advocacy service and the MARAC and MATAC process meets the needs of children affected by domestic abuse	March 2016	(Police Scotland) Gareth Blair (Police Scotland) Gareth Blair (Police Scotland) Gareth Blair (Police Scotland) Alwyn Bell (Police Scotland) Alwyn Bell (Police Scotland) Alwyn Bell (Police Scotland)	2.1
	Develop performance measures to ensure that we can clearly demonstrate that interventions for children affected by domestic abuse have made a positive difference to their lives	performance measures to ensure we can demonstrate that dentify and tackle suspected child sexual exploitation in the dentify and tackle suspected child sexual exploitation in the dentification, recording and awareness of domestic abuse. The dentification, recording and awareness of domestic abuse. The dentification of the	1.1	

Improvement theme	Action	Delivered by	Lead	Quality Indicator
Improve and extend help and support at an early stage and take	Extend the scope and availability of Level I awareness training and cover all areas of public protection and to target a broader multiagency staff group	March 2016	Sean Byrne (CEC)	2.1
protective measures where required (cont.)	Divert more young people, who are already subject to legal orders, away from referral to the Children's Hearing system by use of early and effective interventions and flexible approaches to policing	March 2016	Donny Scott (CEC)	2.1
	The inter-agency learning and development strategy for child protection will be revised to provide specific input on the use of chronologies	March 2016	Andy Jeffries (CEC)	5.2
	Through the <i>Quality Assurance Sub-Committee of the Child Protection Committee</i> , single-agency and multi-agency guidance on chronologies will be reviewed to ensure consistency. Guidance will then be reissued to the multi-agency workforce. Relevant information about a child and family will be shared and decisions will be based upon all available information.	March 2016	Andy Jeffries (CEC)	5.2
Improve planning to meet needs so children experience long lasting	As part of our programme of child protection self-evaluation, a statistically viable sample of our chronologies will be reviewed on a single-agency basis against an agreed template	eness training and to a broader multi- March 2016 Sean Byrne (CEC) Ject to legal orders, tem by use of early hes to policing March 2016 March 2016 Andy Jeffries (CEC) March 2016 Steve Harte (CEC) To our improvement March 2016 March 2016 Sean Byrne (CEC) March 2016 Sean Byrne (CEC) March 2016 March 2016 Sean Byrne (CEC)	5.3	
improvements	Children and young people who are offending/or at risk of offending are identified and personalised plans developed	March 2016	Steve Harte (CEC)	5.2
	Children, young people and families contribute to our improvement activity and our policy making process	March 2016	Sean Byrne (CEC)	6.1
	Our engagement with children, young people, families and other stakeholders clearly shapes our policies and informs our plans	e young people, who are already subject to legal orders, referral to the Children's Hearing system by use of early ve interventions and flexible approaches to policing Igency learning and development strategy for child will be revised to provide specific input on the use of es Ide Quality Assurance Sub-Committee of the Child Protection es, single-agency and multi-agency guidance on chronologies ewed to ensure consistency. Guidance will then be remainly will be shared and decisions will be based upon all information. In our programme of child protection self-evaluation, a viable sample of our chronologies will be reviewed on a more ybasis against an agreed template Ind young people who are offending/or at risk of offending ed and personalised plans developed In our programme of child protection self-evaluation, a with young people and families contribute to our improvement do our policy making process In our programme of child protection self-evaluation, a with young people and families contribute to our improvement of young people and families contribute to our improvement of young people and families contribute to our improvement of young people and families and other resclearly shapes our policies and informs our plans In our programme of child protection self-evaluation, a with the children, young people, families and other resclearly shapes our policies and informs our plans In our policy making process In our policy making process In our policy making process In our policies and informs our plans In our policy making process In our policy making proces	Sean Byrne (CEC)	6.1
	Develop a clear strategy which reflects how we actively involve children and their families in the design and delivery of services	March 2016	Sean Byrne (CEC)	6.1

Improvement theme	Action	Delivered by	Lead	Quality Indicator
	Carry out further self-evaluation using the <i>University of Bedfordshire</i> Child Exploitation toolkit	March 2016	Gareth Blair (Police Scotland)	8.3
Improve joint self-evaluation	Liaise with link member of self-evaluation group to ensure consistent approach to joint self-evaluation	March 2016	Jon Ferrer (CEC)	6.4
	Develop an additional working group of the <i>Quality Assurance Sub-Committee</i> , to look at the outcomes for all children, whether previously registered or still on the Child Protection Register. Self-evaluation will focus on outcomes, performance indicators will be revised to a balance of quantitative data and measurable outcomes	March 2016	Michelle Miller (CEC)	5.1

How will we measure progress?

Performance Measure	Performance		Target		Target			Comment
remonitance ivieasure	2012/13	2013/14	2015/16	2016/17	2017/18	Comment		
Percentage of children added to the CPR within the last year who had been deregistered within the preceding two years	7%	7%	minimise	minimise	minimise	The aim is to minimise but targets are not set as we must respond to need.		
Percentage of young people exiting the Youth Offending Service who do not re- enter the Youth Offending or the Criminal Justice Services within 2 years	68.5%	68%	70%	72%	74%	The latest data refers to young people exiting the Youth Offending Service between April 2009 and March 2010. The target is to increase each year.		
Number of young people (rate per 1,000 aged 8-16) referred to SCRA on offence grounds	8	6	6	6	6	The target is to maintain the good performance. National performance was 6.		

Strategic Outcome 6 Led by Kate Kasprowicz

Our children's and young people's outcomes are not undermined by poverty and inequality



We know that poverty experienced during childhood can have a profound and lasting impact. 'In Scotland today, over 1 in 5 children lives in poverty. It affects their health, their education, their connection to wider society and their future prospects for work' (Joseph Rowntree Foundation, 2014). In Edinburgh, every local authority ward registers child poverty rates of 10% or more after housing costs, with the highest registering over 35% (End Child Poverty, 2013). The number of children living in poverty is projected to increase during the current decade.

We will work to provide services which help to mitigate the impact of poverty and inequality on children as well as develop strategies and actions to break cycles of disadvantage and inequality. There will be a greater focus on removing the barriers that families living in poverty face to being able to support their children's learning. We will also work to challenge and reduce the stigma and discrimination that affects people living in poverty. We will follow the Child Poverty Strategy for Scotland and focus on its three identified priorities: Maximising Household Resources (**Pockets**); Improving children's wellbeing and life chances (**Prospects**); and, Children from low-income households live in well-designed, sustainable places (**Places**).

We will also promote social inclusion by working with partners to increase opportunities and pathways to further learning and sustainable employment. As a result, through active engagement in learning and work, people will be more able to contribute to, and be part of, their communities.

Through partnership working, we can provide children and young people with the opportunities to gain essential skills for work and for their personal and social lives and provide the support to make best use of these. In this way we can do our best to make sure that children and young people make the transition to adulthood with positive options, making positive choices, thus giving them the best possible start into a life which is free from poverty.

What high level actions will we take?

Improvement theme	Action	Delivered by	Lead	Quality Indicator
	Develop measures to 'poverty proof' the school day, starting with a pilot in a small number of schools based on the learning from Newcastle and Glasgow (Pockets)	March 2016	David Bruce (CEC)	2.1, 2.2
	Develop a range of youth literacies (including financial literacy) programmes in deprived areas (Prospects)	March 2016	David Bruce (CEC)	2.1
	Provide a range of learning opportunities for personal and social development for children and young people within deprived communities (Prospects)	March 2016	David Bruce (CEC)	2.1
leaves the reventers of very	Increase the number of young people, particularly those living in deprived areas, who enrol in Edinburgh College (Prospects)	July 2016	Jane Handley (Edinburgh College)	2.1
Increase the percentage of young people entering positive and sustainable destinations, with a	Improve attendance at school and early years establishments, and attainment and achievement of young people (Prospects)	June 2016	Karen Prophet (CEC)	2.1
focus on those from marginalised or disadvantaged groups	Reduce the attainment gap between the lowest achieving pupils and their peers across the city (Prospects)	June 2016	Karen Prophet (CEC)	2.1
	Further develop family engagement, including strong home-school partnerships and particularly for 'hardly reached' families (Prospects)	March 2016	Moyra Wilson (CEC)	2.2, 6.3
	Increase participation in high-value achievement awards (e.g. Duke of Edinburgh's Award), particularly by young people living in poverty (Prospects)	March 2016	David Bruce (CEC)	2.1, 4.1
	Increase participation in employability-related adult learning, including literacy, numeracy and ESOL (Prospects)	march 2016 David Bruce (CEC) Topersonal and social within deprived March 2016 David Bruce (CEC) July 2016 June 2016 Karen Prophet (CEC) March 2016 March 2016 March 2016 March 2016 Moyra Wilson (CEC) March 2016 David Bruce (CEC) David Bruce (CEC) David Bruce (CEC) David Bruce (CEC)	2.1, 2.2, 4.1	
	Identify and develop more safe places to play (Places)	December 2015	Aileen Mclean (CEC)	2.1

Improvement theme	Action	Delivered by	Lead	Quality Indicator
Improve and extend help and support at an early stage	Support <i>Healthy Start</i> and the uptake of vouchers (Prospects)	August 2015	Graham Mackenzie (NHS)	2.1
	Development of more flexible and affordable childcare to meet the needs of families on a low income (Pockets)	December 2015	Aileen Mclean (CEC)	2.1
	Work in partnership with foodbanks to better understand the reasons why families in poverty are using their services (Pockets)	September 2015	John Heywood (CEC)	2.2
Improve planning to meet needs so children experience long lasting improvements	Develop more breakfast club provision to ensure access for all children living in poverty (Prospects)	December 2015	Aileen Mclean (CEC)	2.1, 2.2
	Work in partnership with local people to build community resilience and increase co-production of services (Places)	August 2015	David Bruce (CEC)	4.1, 6.3
	Develop more breakfast club provision to ensure access for all children living in poverty (Prospects) Work in partnership with local people to build community resilience and increase co-production of services (Places) December 2015 Aileen M David B	John Heywood (CEC)	2.1, 2.2	
Improve joint self-evaluation	Develop the scrutiny role of SO6 in order to demonstrate the difference the improvement actions make to poverty and inequality	August 2015	John Heywood (CEC)	6.4, 8.3

How will we measure progress?

Performance Measure	Performance		Target			Cammant	
Performance ivieasure	2012/13	2013/14	/14 2015/16 2016/17 2017/18		2017/18	Comment	
Percentage of pupils gaining 5+ SCQF awards at Level 6 in the 20% most deprived areas (Scottish Index of Multiple Deprivation)	8.1%	8.7%	12.6%	-	-	Data is pre-appeal and the indicator is defined by the Improvement Service Benchmarking programme. No targets set beyond 2015/16 due to the change in the exam system. The national average was 12.6%. The aim is to close the gap experienced by those living in the most deprived areas in the city.	
Percentage of leavers from mainstream schools who enter a positive destination	91.4%	91.2%	Exceed National Average			Data is from the initial survey, sourced in September following leaving mainstream school.	
Percentage of leavers from mainstream schools who are in a follow up positive destination	91.0%	Not available			verage	Data is from the followup survey, sourced in the March following leaving mainstream school, published in June 2014. The target was to reach the national average by 2013/14. Target was reached in 2011/12 and maintained in 2012/13.	
Percentage of leavers from special schools who go on to appropriate and/or positive destinations	64.6%	65.5%	5 S 70% 70% 16 S S		70%	Data used reflects only the number of learners leaving special schools who achieved a positive destination as defined by the Scottish Government. In addition to this a significant number of leavers from special schools have gone on to an appropriately structured destination/package of support to meet their continuing learning needs. No national data about learners from special schools is available for comparison.	

Strategic Outcome 7 -

Making effective use of our resources

Improvement themes

Improve joint workforce planning

Improve joint budgeting

Improve IT systems

Improve joint self-evaluation

Improve planning to meet needs so children experience long lasting improvements

Further improve engagement

As a Partnership, we are committed to working together to deliver this plan and recognise that this will mean taking – and creating opportunities – in collaboration with other stakeholders – to reconfigure service delivery and resources to best meet need and address priorities. This will include co-locating staff, pooling resources (including staffing, budgets and buildings) and making more informed, joint decisions about evaluating existing services and investing in new ones.

Our overall aim is to work together more efficiently and effectively to deliver our strategies and plans and overcome capacity or financial obstacles through local and integrated planning and resource allocation.

Increasingly, we want to be able to make decisions about resource allocation on the basis of the quality of services and the extent to which explicit and agreed outcomes for children and young people are improving.

Developing actions and reporting on progress in this area is co-ordinated by the multi-agency Performance and Infrastructure Group.

What actions will we take?

The high level actions we will take to achieve the outcomes and priorities, structured around the relevant improvement themes, are detailed below.

Improvement theme	Action	Delivered by	Quality Indicator
	Explore opportunities for co-location and test these as they arise	March 2016	8.1
Improve joint workforce planning	Explore options for developing a common approach to recruitment across services	March 2016	7.1, 8.1
	Explore options for developing a wider range of options for skills sharing and work shadowing	March 2016	7.2

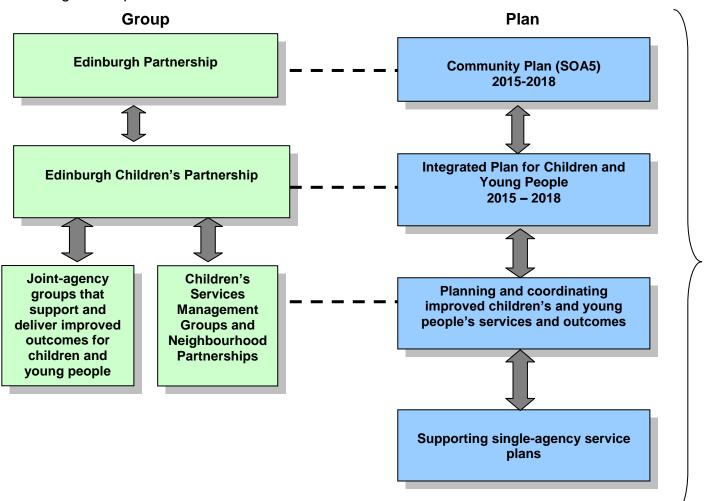
Improvement theme	Action	Delivered by	Quality Indicator
Improve joint workforce planning (cont.)	Explore options for developing integrated management	March 2016	9.4, 8.1
	Address capacity issues in the workforce with a specific focus on the recruitment of additional health visitors	March 2016	7.1
	Develop a joint Children's Services CPD programme	March 2016	7.2
	Develop joint commissioning approaches and actively seek opportunities to create joint contracts and funding wherever possible	March 2016	8.2
Improve joint budgeting	Improve collaborative budgeting and coordinate external funding bids to support agreed Partnership priorities	March 2016	8.1
Improve IT systems	Improve responsiveness of IT systems to support the delivery of integrated services	December 2016	8.1
Further improve engagement	Demonstrate active engagement of children, young people and families in decisions that affect them	March 2016	6.3
	Share and build on good practice in engagement	March 2016	8.3
	Evidence joint approaches to engagement and consultation	March 2016	8.3
	Deliver a shared outcomes framework for the Edinburgh Children's Partnership	March 2016	8.3, 6.4
Improve planning to meet needs so children experience long-lasting improvements	Improve children's services planning through more effective joint working, particularly between the voluntary and statutory services	March 2016	5.3
	Monitor the implementation of the Integrated Plan for Children and Young People through providing tools and support to Strategic Oversight Group Leads	March 2016	6.4
	Annually review the Integrated Plan for Children and Young People	March 2016	6.2
Improve joint self-evaluation	Develop framework for systematic approach to joint self-evaluation and ensure consistent reporting of activity across all Oversight Groups	March 2016	8.3

Getting it right for every child in Edinburgh



HOW DOES THE INTEGRATED PLAN LINK TO THE SINGLE OUTCOME AGREEMENT AND OTHER PLANS AND JOINT-AGENCY GROUPS?

The diagram below shows the structure and relationship between the Edinburgh Partnership, the Children's Partnership and its subgroups alongside the planning landscape around the Integrated Plan for Children and Young People. Also shown is a re-iteration of the agreed improvement themes.



Priorities

to improve support in early years so that all children reach appropriate developmental and social milestones

to reduce the gap in achievement experienced by vulnerable children and young people, particularly those living in deprived areas

to improve and extend help and support for families at an early stage so that fewer children need to be looked after

to improve outcomes for children in need, particularly those who need to be looked after and those with a disability

to improve mental health and wellbeing outcomes for children and young people

to strengthen our approach to tackling child sexual exploitation

to increase the number of young people who enter and sustain positive destinations, particularly those from disadvantaged or marginalised groups

How are we improving the lives of children and young people? The framework of quality indicators (Care Inspectorate)

What key outcomes have we achieved?	How well do we meet the needs of our stakeholders?	How good is our delivery of services for children young people, and families?	How good is our operational management?	How good is our leadership?	
1. Key performance outcomes	2. Impact on children, young people and families	5. Delivery of key processes	6. Policy, service and development and planning	9. Leadership and direction	
1.1 Improvements in the wellbeing of children and young people	2.1 Impact on children and young people 2.2 Impact on families 3. Impact on staff 3.1 Impact on staff	 5.1 Providing help and support at an early stage 5.2 Assessing and responding to risks and needs 5.3 Planning for individual children 5.4 Involving individual children, young people and families 	 6.1 Policies, procedures and legal measures 6.2 Planning and improving services 6.3 Participation of children, young people, families and other stakeholders 6.4 Performance management and quality assurance 7. Management and support of staff 7.1 Recruitment, deployment and joint working 7.2 Staff training, development and support 	 9.1 Visions, values and aims 9.2 Leadership of strategy and direction 9.3 Leadership of people 9.4 Leadership of improvement and change 	
	4. Impact on the community		8. Partnership and resources		
	4.1 Impact on communities		8.1 Management of resources8.2 Commissioning arrangements8.3 Securing improvement through self-evaluation		
		t is our capacity for improvem			